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APPLICANTS
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**** CONTINUING DATA *******
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**** FOREIGN APPLICATIONS *******
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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ****
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Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and /OMAR F Acknowledged	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No FERNANDEZ RIVAS/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY GERMANY	SHEETS DRAWINGS 9	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
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TITLE
 Method for training a learning-capable system

FILING FEE RECEIVED 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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